

EV026160662US

PTO SB-17 (12-99)

Approved for use through 09/30/2000 OMB 0651-0032

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO-SB-09-12. See 37 CFR §§ 1.27 and 1.28.TOTAL AMOUNT OF PAYMENT (\$)  
1938.00*Complete if Known*

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Zhongze Wang
Examiner Name	Unassigned
Group / Art Unit	Unassigned
Attorney Docket No.	MI22-1797

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number  
23-0925Deposit Account Name  
Wells St. John P.S. Charge Any Additional Fee Required  
Under 37 CFR §§ 1.6 and 1.17

2.  Payment Enclosed:

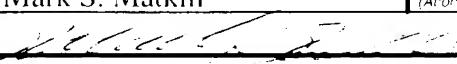
 Check     Money Order     Other

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	0.00
127	50	Surcharge - late provisional filing fee or cover sheet	0.00
139	130	Non-English specification	0.00
147	2,520	For filing a request for reexamination	0.00
112	920*	Requesting publication of SIR prior to Examiner action	0.00
113	1,840*	Requesting publication of SIR after Examiner action	0.00
115	110	Extension for reply within first month	0.00
116	380	Extension for reply within second month	0.00
117	870	Extension for reply within third month	0.00
118	1,350	Extension for reply within fourth month	0.00
128	1,850	Extension for reply within fifth month	0.00
119	300	Notice of Appeal	0.00
121	300	Filing a brief in support of an appeal	0.00
122	260	Request for oral hearing	0.00
138	1,510	Petition to institute a public use proceeding	0.00
140	110	Petition to revive - unavoidable	0.00
141	1,210	Petition to revive - unintentional	0.00
142	1,210	Utility issue fee (or reissue)	0.00
143	430	Design issue fee	0.00
144	580	Plant issue fee	0.00
120	130	Petitions to the Commissioner	0.00
123	50	Petitions related to provisional applications	0.00
126	240	Submission of Information Disclosure Stmt	0.00
541	40	Recording each patent assignment per property (times number of properties)	40.00
146	690	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
149	690	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
Other fee (specify)			0.00
Other fee (specify)			0.00
Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	40.00

## SUBMITTED BY

Name (Print Type)	Mark S. Matkin	Registration No. (Attorney/Agent)	32,268	Telephone	509-624-4276
Signature				Date	1/16/01

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

01/16/02  
PTO  
U.S. PTO

EV026160662US

01-22-02 A

Please type a plus sign (+) inside this box → Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. MI22-1797

First Inventor or Application Identifier Zhongze Wang

Title Silicon-on-Insulator Comprising Integrated Circuitry...

Express Mail Label No. EV026160662US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 28] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> <li>- Descriptive title of the Invention <b>+title page</b></li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (<i>if filed</i>)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]</p> <p>4. Oath or Declaration [Total Pages 2]</p> <ol style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(or continuation/divisional with Box 16 completed)</i> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li> </ul> </li> </ol>	<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>)</p> <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ol>
<b>ACCOMPANYING APPLICATION PARTS</b>	
<p>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of (<i>when there is an assignee</i>) <input checked="" type="checkbox"/> Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (<i>Should be specifically itemized</i>)</p> <p>13. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)</p> <p>15. <input checked="" type="checkbox"/> Other: Check in the amount of \$ 1898.00 Check for \$40.00</p>	

**\*NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation     Divisional     Continuation-in-part (CIP)    of prior application No. \_\_\_\_\_ / \_\_\_\_\_

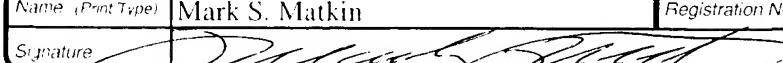
Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	021567	or <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>
---	--------	--

Name	Mark S. Matkin		
	Wells St. John P.S.		
Address	601 W. First Ave., Suite 1300		
City	Spokane	State	WA
Country		Zip Code	99201-3828
Telephone	509-624-4276	Fax	509-838-3424

Name (Print Type)	Mark S. Matkin	Registration No. (Attorney/Agent)	32,268
Signature			
	Date	11/16/02	

Burden Hour Statement This form is estimated to take 6½ hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

J1017 U.S. PTO  
01/16/02J1017 U.S. PTO  
01/16/02